

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		9/27/99
O.I.P.E. CLASSIFIER		10	10-4-99
FORMALITY REVIEW	Xc	71470	10/22/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date				
Final	Original				
1	30	19	2	3	3
2	01	02	03	04	05
3	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓
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Claim	Date				
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If more than 150 claims or 10 actions
 staple additional sheets here

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